

# SB2443



## 102ND GENERAL ASSEMBLY

### State of Illinois

2021 and 2022

SB2443

Introduced 2/26/2021, by Sen. Mattie Hunter

#### SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-5e

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that the rates or payments for home health visits shall be as follows: \$111 for dates of service from January 1, 2021 through December 31, 2021; and \$131 for dates of service on and after January 1, 2022. Provides that the rates or payments for the certified nursing assistant component of the home health agency rate shall be as follows: \$20 for dates of service prior to January 1, 2021; \$25 for dates of service from January 1, 2021 through December 31, 2021; \$30 for dates of service from January 1, 2022 through December 31, 2022; and \$35 for dates of service on and after January 1, 2023. Effective immediately.

LRB102 11334 KTG 16667 b

FISCAL NOTE ACT  
MAY APPLY

A BILL FOR

1 AN ACT concerning public aid.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Illinois Public Aid Code is amended by  
5 changing Section 5-5e as follows:

6 (305 ILCS 5/5-5e)

7 Sec. 5-5e. Adjusted rates of reimbursement.

8 (a) Rates or payments for services in effect on June 30,  
9 2012 shall be adjusted and services shall be affected as  
10 required by any other provision of Public Act 97-689. In  
11 addition, the Department shall do the following:

12 (1) Delink the per diem rate paid for supportive  
13 living facility services from the per diem rate paid for  
14 nursing facility services, effective for services provided  
15 on or after May 1, 2011 and before July 1, 2019.

16 (2) Cease payment for bed reserves in nursing  
17 facilities and specialized mental health rehabilitation  
18 facilities; for purposes of therapeutic home visits for  
19 individuals scoring as TBI on the MDS 3.0, beginning June  
20 1, 2015, the Department shall approve payments for bed  
21 reserves in nursing facilities and specialized mental  
22 health rehabilitation facilities that have at least a 90%  
23 occupancy level and at least 80% of their residents are

1 Medicaid eligible. Payment shall be at a daily rate of 75%  
2 of an individual's current Medicaid per diem and shall not  
3 exceed 10 days in a calendar month.

4 (2.5) Cease payment for bed reserves for purposes of  
5 inpatient hospitalizations to intermediate care facilities  
6 for persons with developmental disabilities, except in the  
7 instance of residents who are under 21 years of age.

8 (3) Cease payment of the \$10 per day add-on payment to  
9 nursing facilities for certain residents with  
10 developmental disabilities.

11 (b) After the application of subsection (a),  
12 notwithstanding any other provision of this Code to the  
13 contrary and to the extent permitted by federal law, on and  
14 after July 1, 2012, the rates of reimbursement for services  
15 and other payments provided under this Code shall further be  
16 reduced as follows:

17 (1) Rates or payments for physician services, dental  
18 services, or community health center services reimbursed  
19 through an encounter rate, and services provided under the  
20 Medicaid Rehabilitation Option of the Illinois Title XIX  
21 State Plan shall not be further reduced, except as  
22 provided in Section 5-5b.1.

23 (2) Rates or payments, or the portion thereof, paid to  
24 a provider that is operated by a unit of local government  
25 or State University that provides the non-federal share of  
26 such services shall not be further reduced, except as

1 provided in Section 5-5b.1.

2 (3) Rates or payments for hospital services delivered  
3 by a hospital defined as a Safety-Net Hospital under  
4 Section 5-5e.1 of this Code shall not be further reduced,  
5 except as provided in Section 5-5b.1.

6 (4) Rates or payments for hospital services delivered  
7 by a Critical Access Hospital, which is an Illinois  
8 hospital designated as a critical care hospital by the  
9 Department of Public Health in accordance with 42 CFR 485,  
10 Subpart F, shall not be further reduced, except as  
11 provided in Section 5-5b.1.

12 (5) Rates or payments for Nursing Facility Services  
13 shall only be further adjusted pursuant to Section 5-5.2  
14 of this Code.

15 (6) Rates or payments for services delivered by long  
16 term care facilities licensed under the ID/DD Community  
17 Care Act or the MC/DD Act and developmental training  
18 services shall not be further reduced.

19 (7) Rates or payments for services provided under  
20 capitation rates shall be adjusted taking into  
21 consideration the rates reduction and covered services  
22 required by Public Act 97-689.

23 (8) For hospitals not previously described in this  
24 subsection, the rates or payments for hospital services  
25 shall be further reduced by 3.5%, except for payments  
26 authorized under Section 5A-12.4 of this Code.

1           (9) For all other rates or payments for services  
2           delivered by providers not specifically referenced in  
3           paragraphs (1) through (8), rates or payments shall be  
4           further reduced by 2.7%.

5           (c) Any assessment imposed by this Code shall continue and  
6           nothing in this Section shall be construed to cause it to  
7           cease.

8           (d) Notwithstanding any other provision of this Code to  
9           the contrary, subject to federal approval under Title XIX of  
10          the Social Security Act, for dates of service on and after July  
11          1, 2014, rates or payments for services provided for the  
12          purpose of transitioning children from a hospital to home  
13          placement or other appropriate setting by a children's  
14          community-based health care center authorized under the  
15          Alternative Health Care Delivery Act shall be \$683 per day.

16          (e) (Blank).

17          (f) (Blank).

18          (g) Notwithstanding any other provision of this Code to  
19          the contrary, subject to federal approval under Title XIX of  
20          the Social Security Act, for dates of service from January 1,  
21          2021 through December 31, 2021, rates or payments for home  
22          health visits shall be \$111. For dates of service on and after  
23          January 1, 2022, rates or payments for home health visits  
24          shall be \$131.

25          (h) Notwithstanding any other provision of this Code to  
26          the contrary, subject to federal approval under Title XIX of

1 the Social Security Act, for dates of service prior to January  
2 1, 2021, rates or payments for the certified nursing assistant  
3 component of the home health agency rate shall be \$20. For  
4 dates of service from January 1, 2021 through December 31,  
5 2021, rates or payments for the certified nursing assistant  
6 component of the home health agency rate shall be \$25. For  
7 dates of service from January 1, 2022 through December 31,  
8 2022, rates or payments for the certified nursing assistant  
9 component of the home health agency rate shall be \$30. For  
10 dates of service on and after January 1, 2023, rates or  
11 payments for the certified nursing assistant component of the  
12 home health agency rate shall be \$35.

13 (Source: P.A. 101-10, eff. 6-5-19; 101-649, eff. 7-7-20.)

14 Section 99. Effective date. This Act takes effect upon  
15 becoming law.